



Permit No: (DMLR use only)	
Bond Applied To: (DMLR use only)	
Bond No:	

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF MINES, MINERALS AND ENERGY
DIVISION OF MINED LAND RECLAMATION
P. O. DRAWER 900; BIG STONE GAP, VA 24219
TELEPHONE: (276) 523-8100

SURETY BOND

KNOW ALL MEN BY THESE PRESENTS, THAT THE UNDERSIGNED

(hereafter **PRINCIPAL**),

whose principal place of business is _____

and who does business as a [**CHECK ONE ONLY**]: _____ Corporation; _____ Limited Partnership;
_____ Limited Liability Company; _____ Partnership; or _____ Sole Proprietorship, acting herein as **PRINCIPAL**, and

(hereafter **SURETY**),

whose principal business address is _____
and who was organized and is existing under the laws of the State of _____
and licensed to write and perform surety business in the Commonwealth of Virginia, are held and firmly bound unto the

COMMONWEALTH OF VIRGINIA,
DIRECTOR, DIVISION OF MINED LAND RECLAMATION
(hereafter **OBLIGEE**),

in the sum of _____
(\$) _____ Dollars for the payment of which sum the **PRINCIPAL** and **SURETY** bind themselves, their heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these presents.

THE CONDITION OF THE ABOVE OBLIGATION is such that:

WHEREAS, the **PRINCIPAL** proposes to commence coal surface mining to be known as

in _____ County(ies) of Virginia; and,

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WHEREAS, the above-named **PRINCIPAL** has submitted [CHECK ONE ONLY]:

____ Permit Application Number or, ____ Permit Number _____ including a mining and reclamation plan, to conduct and reclaim a surface coal mining operation, as defined pursuant to the **VIRGINIA COAL SURFACE MINING CONTROL AND RECLAMATION ACT** (hereafter **ACT**), as amended, with its attendant regulations; and,

WHEREAS, the **PRINCIPAL** has chosen to file this performance bond as a guarantee that the reclamation of the land disturbed during this surface mining operation will be completed as required by the **ACT**, its attendant regulations, and as specified in the permit as issued; and,

WHEREAS, the **SURETY**, and their successors and assigns agree to guarantee the obligation and to indemnify, defend, and hold harmless **OBLIGEE** from any and all losses and expenses which **OBLIGEE** may sustain as a result of the **PRINCIPAL'S** failure to comply with the condition of the obligation;

WHEREAS, obligations guaranteed by this performance bond shall be in effect for the following described lands approved as the permit area or increment upon which initial or succeeding operations will be conducted:

NOW, if the **PRINCIPAL** faithfully completes all reclamation and abatement requirements set forth in the **ACT** and its Permit issued in reliance on this Surety Bond, including the mining and reclamation plan, then this obligation shall be void; otherwise, it shall remain in full force and effect beginning on the date of the approval and issuance of [CHECK ONE ONLY]:

____ Permit Application Number or, ____ Permit Number _____ pursuant to the **ACT** and continue until:

(a) the permit has been completed to the satisfaction of the **OBLIGEE**, or

(b) the bond is released pursuant to the **ACT**, or

(c) in the event neither (a) or (b) above applies, for a minimum period of five (5) years for a general permit or two (2) years for an approved plan for reining. This shall be the minimum period of extended responsibility unless the bond is replaced in accordance with the **ACT**, or unless the permit has been sold, reassigned, or otherwise transferred in accordance with the **ACT**. It shall be further understood that if the **PRINCIPAL** performs any augmented seeding, fertilization, or other supplemental reclamation work on the site prior to bond release, the period of liability under this bond shall begin again subject to the exception found in the **ACT**

The failure of the **PRINCIPAL** to fulfill the obligations specified by the **ACT** and its permit shall result in a forfeiture of this performance bond according to the procedures described in the **ACT**.

The **SURETY** shall not cancel this bond at any time for any reason, including non-payment of premium or bankruptcy of the **PRINCIPAL** during the period of liability. The amount of the **SURETY'S** liability may be adjusted by the **OBLIGEE** pursuant to the **ACT** for lands covered by this bond.

The **SURETY** shall give prompt notice to the **PRINCIPAL** and to the **OBLIGEE** of any notice received or action filed alleging the insolvency or bankruptcy of the **SURETY** or of the **PRINCIPAL**, or alleging any violations or regulatory requirements which could result in suspension or revocation of the **SURETY'S** license to do business.

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In the event the **SURETY** becomes unable to fulfill its obligations under the bond for any reason, notice shall be given immediately to the **PRINCIPAL** and to the **OBLIGEE**. Any proceeding, legal or equitable, under this bond must be instituted in a Virginia court of competent jurisdiction and shall be governed by the laws of the Commonwealth of Virginia.

Upon the incapacity of the **SURETY** by reason of bankruptcy, insolvency, or suspension or revocation of its license, the **PRINCIPAL** shall be deemed to be without bond coverage in violation of the **ACT** and subject to enforcement actions described in the **ACT**.

I. BY COMPANY/PRINCIPAL:	
_____	(SEAL) By: _____
Company /Principal	Company/Principal Official
_____	_____
Title	Date
Subscribed and sworn/affirmed to before me by _____	
this _____ day of _____ 20 _____, in the State of _____	
in the City/County of _____	
_____	_____ (Seal)
Notary Public Name (printed or typed)	Notary Public Signature
My Commission expires _____	20 _____

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II. BY SURETY: Attach copy bearing seal of Power of Attorney or documentation supporting Corporate Officer's authority to issue surety bond.

Surety Name

(SEAL) By: _____
Attorney-in-Fact

Date

Attorney-in-Fact Name (printed or typed)

**AFFIDAVIT AND ACKNOWLEDGEMENT OF ATTORNEY-IN-FACT
COMMONWEALTH OF VIRGINIA**

(or, alternatively, Commonwealth or State of _____
CITY/COUNTY OF _____, to wit:

I, the undersigned notary public, do certify that _____
personally appeared before me in the jurisdiction aforesaid and made oath that he/she is the
attorney-in-fact of _____

the Surety, that he/she is duly authorized to execute on its behalf the foregoing Bond pursuant to the attached Power of Attorney, and on behalf of said Surety acknowledged the aforesaid Bond(s) as its act and deed.

Given under my hand this _____ day of _____, 20 _____

Notary Public Name (printed or typed)

Notary Public Signature

(SEAL)

My Commission expires: _____, 20 _____

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III. BY ISSUING AGENT:	<ol style="list-style-type: none"> 1. Attach copy of Agency License and Appointment Card from the Virginia Bureau of Insurance. 2. Attach copy of Agent's License and Appointment Card from the Virginia Bureau of Insurance.
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Insurance Agency Issuing Surety Bond (provide the following information):	
Agency name:	_____
Agency address:	_____
Authorized agent:	_____
Authorized agent address	_____
Office telephone number:	_____

IV. DIVISION APPROVAL:	
ACCEPTED: _____ <div style="text-align: center;">Division of Mined Land Reclamation</div>	Date: _____